PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

->-APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

P00000029153 DOCUMENT #

1. Corporation Name

COUNTRYBOY MOBILE HOME ENTERPRISES, INC.

Principal Place of Business

Mailing Address

Suite, Apt. #, etc.

City'& State*

1319 YELLOW WATER RD. BALDWIN FL 32234

Suite, Apt. #, etc.

City & State

2. New Principal Office Address, If Applicable

1319 YELLOW WATER RD. BALDWIN FL 32234

3. New Mailing Office Address, If Applicable

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

	rz ologiool NU ****150 NO		
Date Incorporated or Qualified To Do Business in Florida	or Qualified Florida 03/16/2000		
5. FEI Number	Applied For		
<u>-59-37532</u>	56 Not Applicable		

		32111113	for a Certificate of Status
. Names a	and Street Addresses of Each Officer and/or Dire	ctor (Florida nonprofit corporations must list at least 3 directors)	
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
res	Henry L. Roberson	1319 Yellow Water Road	Baldwin, FL 32234
ec/Trea	Dorothy A Roberso	1319 Yellow Water Road	Baldwin, FL 32234
-	J	,	·
-		3	000053491939
			*****150.00 ****150.00

8.	Name and	Address of	Current	Registered Agent

9. Name and Address of New Registered Agent

ROBERSON, HENRY L. SR.

10757_OLD_GAINESVILLE_RD.

JACKSONVILLE FL 32221

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agen

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

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Lyons and Lyons Certified Public Accountants

657 South Sixth Street Macclenny, Florida 32063

Telephone

(904) 259 4307

Fax

(904) 259 5102

October 30, 2001

Divisions of Corporations Annual Report/Reinstatement Section P O Box 6327 Tallahassee, Florida 32314-6327

Re: Countryboy Mobile Home Enterprises, Inc.

Document #P00000029153

Dear Sir or Madam:

This Corporation was incorporated in 2000. Please note the individual incorporating the business use an incorrect address as the address of record. Consequently, the client never received any correspondence pertaining to the annual report. This is the first correspondence they have received pertaining to this matter. We have completed the reinstatement application and included a check for the \$150. We respectfully request an abatement of the reinstatement fee.

Should you have any questions please don't hesitate to contact me.

Sincerely,

Emil Clayton Lyons, CPA

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